

TRANSMITTAL FORM

Application Serial Number	10/824,033
Filing Date	APRIL 14, 2004
First Named Inventor	JURGEN DORN, ET AL.
Group Art Unit	3731
Examiner Name	TRUONG, KEVIN
Attorney Docket No.	14673-069US
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

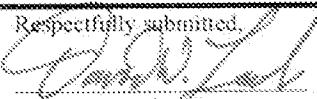
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)	<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Certificate of Correction (in duplicate)
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input checked="" type="checkbox"/> Preliminary After Final <input type="checkbox"/> Affidavite/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time (1/2/3 months)	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD(s) for large table or computer program	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Sequence Listing submission	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

CORRESPONDENCE ADDRESS

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 1001 Pennsylvania Ave., N.W.
 Suite 400
 Washington, D.C. 20004
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 CUSTOMER NO: 61263

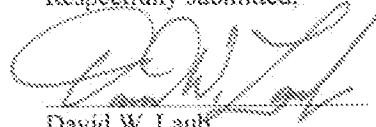
SIGNATURE BLOCK

Date: September 1, 2006
 Reg. No.: 38,708
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Respectfully submitted,

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 Suite 400
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**FEE TRANSMITTAL
FY 2006**

		Complete if Known
Application Serial No.	10/324,033	
Filing Date	APRIL 14, 2004	
First Named Inventor	JURGEN DORN, ET AL.	
Group No.	3731	
Examiner Name	TRUONG, KEVIN	
Confirmation No.	6011	

METHOD OF PAYMENT			FEE CALCULATION (continued)																																				
<input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other			4. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Fee (\$)</td> <td>Fee (\$)</td> </tr> <tr> <td>130</td> <td>65</td> </tr> <tr> <td>50</td> <td>25</td> </tr> <tr> <td>130</td> <td>130</td> </tr> <tr> <td>2,520</td> <td>2,520</td> </tr> <tr> <td>120</td> <td>60</td> </tr> <tr> <td>480</td> <td>225</td> </tr> <tr> <td>1,020</td> <td>510</td> </tr> <tr> <td>1,590</td> <td>795</td> </tr> <tr> <td>2,160</td> <td>1,080</td> </tr> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>1,000</td> <td>500</td> </tr> <tr> <td>400</td> <td>0</td> </tr> <tr> <td>180</td> <td>180</td> </tr> <tr> <td>790</td> <td>395</td> </tr> </tbody> </table> Fee Description Fee Paid			Large Entity	Small Entity	Fee (\$)	Fee (\$)	130	65	50	25	130	130	2,520	2,520	120	60	480	225	1,020	510	1,590	795	2,160	1,080	500	250	500	250	1,000	500	400	0	180	180	790	395
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<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840			130 - Surcharge - late filing fee or oath. 50 - Surcharge - late provisional filing fee or cover sheet 130 - Non-English specification 2,520 - Request for ex parte re-examination 120 - Extension for reply within 1 st mo. 480 - Extension for reply within 2 nd mo. 1,020 - Extension for reply within 3 rd mo. 1,590 - Extension for reply within 4 th mo. 2,160 - Extension for reply within 5 th mo. 500 - Notice of Appeal 500 - Filing a brief in support of an appeal 1,000 - Request for oral hearing 400 - Petitions to the Director 180 - Submission of IDS 790 - Filing a submission after final rejection (37 CFR 1.129(a))																																				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES <table border="1"> <thead> <tr> <th>Application Type</th> <th>Filing</th> <th>Search</th> <th>Examination</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>300</td> <td>200</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>130</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>300</td> <td>160</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>500</td> <td>600</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>			Application Type	Filing	Search	Examination	Fee Paid	Utility	300	300	200		Design	200	100	130		Plant	200	300	160		Reissue	300	500	600		Provisional	200	0	0		Small Entity Discount						
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2. EXCESS CLAIM FEES <table border="1"> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent</td> <td>50</td> <td>25</td> </tr> <tr> <td>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent</td> <td>200</td> <td>100</td> </tr> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>43</td> <td>19</td> <td>950.00</td> </tr> </tbody> </table>				Fee	Small Entity Fee (\$)	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25	Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100	Total Claims	Extra Claims	Fee Paid (\$)	43	19	950.00	130 - Extra Claims 790 - For each additional invention to be examined (37 CFR 1.129(b)) 100 - Certificate of Correction for applicant's error 130 - Submission of Terminal Disclaimer Other fee (Specify) _____																					
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<small>HP = highest number of total claims paid for, if greater than 3</small>			TOTAL AMOUNT SUBMITTED (\$2,150.00)																																				
5. APPLICATION SIZE FEE If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).						SIGNATURE BLOCK																																	
Total Sheets -100= 0 /50= round up to a whole number x = 0.00			 Respectfully submitted, David W. Laub Attorney for the Applicant(s) Proskauer Rose LLP 1001 Pennsylvania Ave., N.W., #400 Washington, D.C. 20004																																				
CORRESPONDENCE ADDRESS Direct all correspondence to: PATENT ADMINISTRATOR Proskauer Rose LLP 1001 Pennsylvania Avenue, N.W., Suite 400 Washington, D.C. 20004 Tel. No.: (202) 416-6800 Fax No.: (202) 416-6899 CUSTOMER NO: 41263																																							